

Application number
(for FCA/PRA use only)

The *FCA* and *PRA* have produced notes which will assist both the applicant and the *candidate* in answering the questions in this form. Please read these notes, which are available on both *FCA* and *PRA* websites at:

<https://handbook.fca.org.uk/handbook/SUP/10A/Annex4>

<http://www.bankofengland.co.uk/PRA>

Both the applicant and the *candidate* will be treated by the *FCA* and *PRA* as having taken these notes into consideration when completing this form.

Long Form A – Solvency II firms only¹

Application to perform controlled functions

FCA Handbook Reference: SUP 10A Annex 4D

PRA Rulebook Reference: Solvency II firms: Senior Insurance Managers Regime - Applications and Notifications

Name of *candidate*[†]
(to be completed by applicant firm)

Name of applicant *firm*[†]
(as entered in 2.01)

Applicant firm reference number[†]
(as entered in 2.02)

Financial Conduct Authority
12 Endeavour Square
London, E20 1JN
United Kingdom
Telephone +44 (0) 300 500 0597
E-mail iva@fca.org.uk
Website <http://www.fca.org.uk>
Registered as a Limited Company in England and Wales No
1920623. Registered Office as above.

Prudential Regulation Authority
20 Moorgate
London
EC2R 6DA
United Kingdom
Telephone +44 (0) 203 461 7000
E-mail PRA-
ApprovedPersons@bankofengland.co.uk
Website www.bankofengland.co.uk/PRA
Registered as a Limited Company in England and Wales
No 07854923. Registered Office: 8 Lothbury Road, London,
EC2R 7HH.

¹ Please see the *FCA Handbook Glossary* for the definition of *Solvency II firm*, and for the *PRA* see the firms included in *PRA Rulebook*: Solvency II firms: Insurance - Senior Insurance Management Functions Chapter 1 (Applications and Definitions)

1.01	a	<i>Candidate</i> Individual Reference Number (IRN) †	
	b	OR name of previous regulatory body†	
	c	AND previous reference number (if applicable) †	
1.02		Title (e.g. Mr, Mrs, Ms, etc) †	
1.03		Surname†	
1.04		ALL forenames†	
1.05		Name commonly known by†	
1.06		Date of birth (dd/mm/yyyy) †	
1.07		National Insurance number†	
1.08		Previous name †	
1.09		Date of name change†	
1.10	a	Nationality†	
	b	Passport number (if National Insurance number not available) †	
1.11		Place of birth†	
1.12		Phone number	


I have supplied further information related to this page in Section 6†
 YES NO

† The above question(s) should be completed whether submission of this form is online or in one of the other ways set out in SUP 15.7.4R- 15.7.9G or in ‘Solvency II firms: Senior Insurance Managers Regime - Applications and Notifications’ in the *PRA* Rulebook Long Form A –Solvency II firms Application to perform controlled functions October 2018

1.12 a Private address[†]

[Redacted address field]

b

Postcode[†]

c

Dates resident at this address
(mm/yyyy)[†]

From

[Redacted date field]

To

PRESENT

(If address has changed in the last three years, please provide addresses for the previous three years.)

1.13 a Previous address 1[†]

[Redacted address field]

b

Postcode[†]

c

Dates resident at this address
(mm/yyyy)[†]

From

[Redacted date field]

To

[Redacted date field]

1.14 a Previous address 2[†]

[Redacted address field]

b

Postcode[†]

c

Dates resident at this address
(mm/yyyy)[†]

From

[Redacted date field]

To

[Redacted date field]



I have supplied further information related to this page in Section 6[†]

YES

NO

[†] The above question(s) should be completed whether submission of this form is online or in one of the other ways set out in SUP 15.7.4R- 15.7.9G or in 'Solvency II firms: Senior Insurance Managers Regime - Applications and Notifications' in the PRA Rulebook Long Form A –Solvency II firms Application to perform controlled functions October 2018

2.01	Name of <i>firm</i> making the application	
2.02	Firm Reference Number (FRN)	
2.03 a	Who should the <i>FCA/PRA</i> contact at the <i>firm</i> in relation to this application?	
b	Position	
c	Telephone	
d	Fax	
e	E-mail	



I have supplied further information related to this page in Section 6[†]

YES

NO

[†] The above question(s) should be completed whether submission of this form is online or in one of the other ways set out in SUP 15.7.4R- 15.7.9G or in 'Solvency II firms: Senior Insurance Managers Regime - Applications and Notifications' in the *PRA* Rulebook Long Form A –Solvency II firms Application to perform controlled functions October 2018

3.01 Nature of the arrangement between the candidate and the applicant.

<i>a</i>	<i>Employee</i>	<input type="checkbox"/>
<hr/>		
<i>b</i>	<i>Group employee</i>	<input type="checkbox"/>
	Name of group	<div style="background-color: #cccccc; width: 100%; height: 15px;"></div>
<hr/>		
<i>c</i>	Contract for services	<input type="checkbox"/>
<hr/>		
<i>d</i>	Partner	<input type="checkbox"/>
<hr/>		
<i>e</i>	Other	<input type="checkbox"/>
	Give details	<div style="background-color: #cccccc; width: 100%; height: 15px;"></div>
<hr/>		

Proposed date of appointment

Length of appointment (if applicable)

† The above question(s) should be completed whether submission of this form is online or in one of the other ways set out in SUP 15.7.4R- 15.7.9G or in 'Solvency II firms: Senior Insurance Managers Regime - Applications and Notifications' in the PRA Rulebook Long Form A –Solvency II firms Application to perform controlled functions October 2018

3.02 For applications from a single *firm*, please tick the boxes that correspond to the *controlled functions* to be performed. If the *controlled functions* are to be performed for more than one *firm*, please go to question **3.04**

Function	Description of a <i>controlled function</i>	Tick (if applicable)	Effective Date
SIMF 1	Chief Executive officer	<input type="checkbox"/>	
SIMF 2	Chief Finance function	<input type="checkbox"/>	
SIMF 4	Chief Risk officer	<input type="checkbox"/>	
SIMF 5	Head of Internal Audit	<input type="checkbox"/>	
SIMF 7	Group Entity Senior Manager	<input type="checkbox"/>	
SIMF 9	Chairman	<input type="checkbox"/>	
SIMF 10	Chair of the Risk Committee	<input type="checkbox"/>	
SIMF 11	Chair of the Audit Committee	<input type="checkbox"/>	
SIMF 12	Chair of the Remuneration Committee	<input type="checkbox"/>	
SIMF 14	Senior Independent Director	<input type="checkbox"/>	
SIMF 19	Head of Third Country Branch function	<input type="checkbox"/>	
SIMF 20	Chief Actuary	<input type="checkbox"/>	
SIMF21	With Profits Actuary	<input type="checkbox"/>	
SIMF22	Underwriting function	<input type="checkbox"/>	
SIMF23	Underwriting Risk Oversight Officer (Lloyd's)	<input type="checkbox"/>	
SIMF26	Head of small run-off firm function	<input type="checkbox"/>	
CF 1	Director	<input type="checkbox"/>	
CF 2a	Chair of the Nominations Committee	<input type="checkbox"/>	
CF 2b	Chair of the With-Profits Committee	<input type="checkbox"/>	
CF 5	Director of unincorporated association function	<input type="checkbox"/>	
CF 10	Compliance Oversight	<input type="checkbox"/>	
CF 10a	CASS Operational Oversight	<input type="checkbox"/>	
CF 11	Money Laundering Reporting	<input type="checkbox"/>	
CF 28	Systems and Controls	<input type="checkbox"/>	
CF 29	Significant Management	<input type="checkbox"/>	
CF 30	Customer Function	<input type="checkbox"/>	
CF 51	Actuarial conduct function (third country)	<input type="checkbox"/>	

3.03 Job title

Insurance distribution

Will the *candidate* be responsible for Insurance distribution at the *firm*?

YES

NO

(Note: Yes can only be selected if the individual is applying for a governing function (other than *controlled functions* CF2a and CF2b) (MIPRU 2.2.2))



I have supplied further information related to this page in Section 6[†]

YES

NO

3.04

Complete this section only if the application is on behalf of more than one *firm*.

List all *firms* within the *group* (including the *firm* entered in 2.01) for which the *candidate* requires approval and the requested *controlled function* for that *firm*.[†]

	Firm Reference Number	Name of <i>firm</i>	Controlled function	Job title	Effective date
a					
b					
c					
d					
e					



I have supplied further information related to this page in Section 6

YES

NO

[†] The above question(s) should be completed whether submission of this form is online or in one of the other ways set out in SUP 15.7.4R- 15.7.9G or in 'Solvency II firms: Senior Insurance Managers Regime - Applications and Notifications' in the *PRA* Rulebook Long Form A –Solvency II firms Application to perform controlled functions October 2018

N.B.: ALL gaps must be accounted for

4.01 Employment details (1) †

a	Period (mm/yyyy)	From	<input type="text"/>	To	<input type="text"/>
b	Nature of employment	<i>a</i>	Employed	<input type="checkbox"/>	
		<i>b</i>	Self-employed	<input type="checkbox"/>	
		<i>c</i>	Not employed	<input type="checkbox"/>	
		<i>d</i>	Full-time education	<input type="checkbox"/>	
	If <i>c</i> or <i>d</i> is ticked, please give details				
	<input type="text"/>				
c	Name of employer	<input type="text"/>			
d	Nature of business	<input type="text"/>			
e	Previous / other names of employer	<input type="text"/>			
f	Last known address of employer	<input type="text"/>			
g	Is/was employer regulated by a regulatory body?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Name of regulatory body and country	
		<input type="text"/>			
h	Is/was employer an <i>appointed representative/tied agent</i> ?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, of which <i>firm</i> ?	
		<input type="text"/>			
i	Position held	<input type="text"/>			
j	Responsibilities	<input type="text"/>			
k	Reason for leaving:	<i>a</i>	Resignation	<input type="checkbox"/>	
		<i>b</i>	Redundancy	<input type="checkbox"/>	
		<i>c</i>	Retirement	<input type="checkbox"/>	
		<i>d</i>	Termination/dismissal	<input type="checkbox"/>	
		<i>e</i>	End of contract	<input type="checkbox"/>	
		<i>f</i>	Other	<input type="checkbox"/>	
	Specify	<input type="text"/>			

† The above question(s) should be completed whether submission of this form is online or in one of the other ways set out in SUP 15.7.4R- 15.7.9G or in 'Solvency II firms: Senior Insurance Managers Regime - Applications and Notifications' in the PRA Rulebook Long Form A –Solvency II firms Application to perform controlled functions October 2018

4.02 Employment details (2) †

a	Period (mm/yyyy)	From	<input type="text"/>	To	<input type="text"/>
b	Nature of employment	<i>a</i>	Employed	<input type="checkbox"/>	
		<i>b</i>	Self-employed	<input type="checkbox"/>	
		<i>c</i>	Not employed	<input type="checkbox"/>	
		<i>d</i>	Full-time education	<input type="checkbox"/>	
	If <i>c</i> or <i>d</i> is ticked, please give details	<input type="text"/>			
c	Name of employer	<input type="text"/>			
d	Nature of business	<input type="text"/>			
e	Previous / other names of employer	<input type="text"/>			
f	Last known address of employer	<input type="text"/>			
g	Is/was employer regulated by a regulatory body?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Name of regulatory body and country	
		<input type="text"/>			
h	Is/was employer an <i>appointed representative/tied agent</i> ?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, of which <i>firm</i> ?	
		<input type="text"/>			
i	Position held	<input type="text"/>			
j	Responsibilities	<input type="text"/>			
k	Reason for leaving:	<i>a</i>	Resignation	<input type="checkbox"/>	
		<i>b</i>	Redundancy	<input type="checkbox"/>	
		<i>c</i>	Retirement	<input type="checkbox"/>	
		<i>d</i>	Termination/dismissal	<input type="checkbox"/>	
		<i>e</i>	End of contract	<input type="checkbox"/>	
		<i>f</i>	Other	<input type="checkbox"/>	
	Specify	<input type="text"/>			

➔ I have supplied further information related to this page in Section 6† YES NO

† The above question(s) should be completed whether submission of this form is online or in one of the other ways set out in SUP 15.7.4R- 15.7.9G or in 'Solvency II firms: Senior Insurance Managers Regime - Applications and Notifications' in the PRA Rulebook Long Form A –Solvency II firms Application to perform controlled functions October 2018

5.01 Criminal Proceedings

When answering the questions in this section *candidate* should include matters whether in the UK or overseas. By virtue of the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975, if the *candidate* is subject to the law of England and Wales, the *candidate* must disclose spent convictions and cautions (other than a protected conviction or caution). By virtue of the Rehabilitation of Offenders Act 1974 (Exclusions and Exceptions) (Scotland) Order 2013 and the Rehabilitation of Offenders (Exceptions) Order (Northern Ireland) 1979, if the *candidate* is subject to the law of Scotland or Northern Ireland, the *candidate* must disclose spent convictions (other than a protected conviction).

5.01.1a	Has the <i>candidate</i> ever been convicted of any criminal offence (whether spent or not and whether or not in the <i>United Kingdom</i>): <ul style="list-style-type: none"> i. involving fraud, theft, false accounting, offences against the administration of public justice (such as perjury, perverting the course of justice and intimidation of witnesses or jurors), serious tax offences or other dishonesty or ii. relating to <i>companies, building societies, industrial and provident societies, credit unions, friendly societies</i>, insurance, banking or other financial services, insolvency, consumer credit or consumer protection, <i>money laundering</i>, market manipulations or <i>insider dealing</i>? 	YES <input type="checkbox"/> NO <input type="checkbox"/>
b	Is the <i>candidate</i> currently the subject of any criminal proceedings, whether in the UK or elsewhere?	YES <input type="checkbox"/> NO <input type="checkbox"/>
c	Has the <i>candidate</i> ever been given a caution in relation to any criminal offence?	YES <input type="checkbox"/> NO <input type="checkbox"/>
5.01.2	Has the <i>candidate</i> any convictions for any offences other than those in 5.01.1 above (excluding traffic offences that did not result in a ban from driving or did not involve driving without insurance)?	YES <input type="checkbox"/> NO <input type="checkbox"/>
5.01.3	Is the candidate the subject of any ongoing criminal investigation?	YES <input type="checkbox"/> NO <input type="checkbox"/>
5.01.4	Has the <i>candidate</i> been ordered to produce documents pursuant to any ongoing criminal investigation or been the subject of a search (with or without a warrant) pursuant to any ongoing criminal investigation?	YES <input type="checkbox"/> NO <input type="checkbox"/>



I have supplied further information related to this page in Section 6[†] YES NO

[†] The above question(s) should be completed whether submission of this form is online or in one of the other ways set out in SUP 15.7.4R- 15.7.9G or in 'Solvency II firms: Senior Insurance Managers Regime - Applications and Notifications' in the PRA Rulebook Long Form A –Solvency II firms Application to perform controlled functions October 2018

5.01.5 Has any *firm* at which the *candidate* holds or has held a position of influence ever:

(Please check the guidance notes for the meaning of 'position of influence' in the context of the questions in this part of the form.)

- | | | | |
|----------|--|------------------------------|-----------------------------|
| a | Been convicted of any criminal offence? | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| b | Been summonsed, charged with or otherwise investigated or prosecuted for any criminal offence? | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| c | Been the subject of any criminal proceeding which has not resulted in a conviction? | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| d | Been ordered to produce documents in relation to any criminal investigation or been the subject of a search (with or without a warrant) in relation to any criminal investigation? | YES <input type="checkbox"/> | NO <input type="checkbox"/> |

In answering question 5.01.5, you should include all matters even when the summons, charge, prosecution or investigation did not result in a conviction, and, in respect of 5.01.5d, even where the *firm* was not the subject of the investigation. However, *firms* are not required to disclose details of any specific individuals who were subject to historic (as opposed to ongoing) criminal investigations, prosecutions, summons or other historic criminal proceedings.



I have supplied further information related to this page in Section 6[†] YES NO

[†] The above question(s) should be completed whether submission of this form is online or in one of the other ways set out in SUP 15.7.4R- 15.7.9G or in 'Solvency II firms: Senior Insurance Managers Regime - Applications and Notifications' in the *PRA* Rulebook Long Form A –Solvency II firms Application to perform controlled functions October 2018

5.02 Civil Proceedings

5.02.1	Has the <i>candidate</i> , ever been the subject of a judgement debt or award against the <i>candidate</i> ?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
	Please give a full explanation of the events in questions. The <i>candidate</i> should include all County Court Judgement(s) (CCJs) made against the <i>candidate</i> , whether satisfied or not); and i) the sum and date of all judgements debts, awards or CCJs (whether satisfied or not); and ii) the total number of all judgment debts, awards or CCJs ordered.		
5.02.2	Has the <i>candidate</i> ever been party to any civil proceedings which resulted in any order against the <i>candidate</i> (other than a judgement debt or award referred to in 5.02.1 above)? (The <i>candidate</i> should include, for example, injunctions and employment tribunal proceedings.)	YES <input type="checkbox"/>	NO <input type="checkbox"/>
5.02.3	Is the <i>candidate</i> aware of:		
a	Any proceedings that have begun, or anyone's intention to begin proceedings against the <i>candidate</i> , for a CCJ or another judgement debt?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
b	More than one set of proceedings, or anyone's intention to begin more than one set of proceedings, that may lead to a CCJ or other judgement debt?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
c	Anybody's intention to claim more than £1,000 of CCJs or judgement debts in total from the <i>candidate</i> ?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
5.02.4	Does the <i>candidate</i> have any current judgment debts (including CCJs) made under a court order still outstanding, whether in full or in part?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
5.02.5	Has the <i>candidate</i> ever failed to satisfy any such judgment debts (including CCJs) made under a court order still outstanding, whether in full or part, within one year of the order being made?	YES <input type="checkbox"/>	NO <input type="checkbox"/>



I have supplied further information related to this page in Section 6[†] YES NO

[†] The above question(s) should be completed whether submission of this form is online or in one of the other ways set out in SUP 15.7.4R- 15.7.9G or in 'Solvency II firms: Senior Insurance Managers Regime - Applications and Notifications' in the PRA Rulebook Long Form A –Solvency II firms Application to perform controlled functions October 2018

5.02.6	Has the <i>candidate</i> ever:		
a	Filed for the <i>candidate</i> 's own bankruptcy or had a bankruptcy petition served on the <i>candidate</i> ?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
b	Been adjudged bankrupt?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
c	Been the subject of a bankruptcy restrictions order (including an interim bankruptcy restrictions order) or offered a bankruptcy restrictions undertaking?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
d	Made any arrangements with the <i>candidate</i> 's creditors, for example a deed of arrangement or an individual voluntary arrangement (or in Scotland a trust deed)?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
e	Had assets sequestrated?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
f	Been involved in any proceedings relating to the above matters even if such proceedings did not result in the making of any kind of order against the <i>candidate</i> or result in any kind of agreement with the <i>candidate</i> ?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
5.02.7	Does the <i>candidate</i> , or any undertaking under their management, have any outstanding financial obligations arising from <i>regulated activities</i> , which have been carried out in the past? (whether or not in the UK or overseas)?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
5.02.8	Has the <i>candidate</i> ever been adjudged by a court or tribunal (whether criminal, civil or administrative) for any fraud, misfeasance, negligence, wrongful trading or other misconduct?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
5.02.9	Is the <i>candidate</i> currently:		
a	Party to any civil proceedings? (including those covered in 5.02.3 above)	YES <input type="checkbox"/>	NO <input type="checkbox"/>
b	Aware of anybody's intention to begin civil proceedings against the <i>candidate</i> ? (The <i>candidate</i> should include any ongoing disputes whether or not such dispute is likely to result in any order against the <i>candidate</i> .)	YES <input type="checkbox"/>	NO <input type="checkbox"/>
5.02.10	Has any <i>firm</i> at which the <i>candidate</i> holds or has held a position of influence ever been:		
a	Adjudged by a court civilly liable for any fraud, misfeasance, wrongful trading or other misconduct?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
b	The subject of a judgement debt or award against the <i>firm</i> ? (The <i>candidate</i> should include all CCJs made against the <i>firm</i> , whether satisfied or not).	YES <input type="checkbox"/>	NO <input type="checkbox"/>
c	Party to any other civil proceedings which resulted in an order against the <i>firm</i> other than in relation to matters covered in 5.02.10a and 5.02.10b above?	YES <input type="checkbox"/>	NO <input type="checkbox"/>



I have supplied further information related to this page in Section 6[†] YES NO

[†] The above question(s) should be completed whether submission of this form is online or in one of the other ways set out in SUP 15.7.4R- 15.7.9G or in 'Solvency II firms: Senior Insurance Managers Regime - Applications and Notifications' in the PRA Rulebook Long Form A –Solvency II firms Application to perform controlled functions October 2018

5.02.11 Is any *firm* at which the *candidate* currently holds or has held, within the last 12 months from the date of the submission of this form, a position of influence currently:

a a party to civil proceedings?

YES NO

b aware of anyone's intention to begin civil proceedings against them?

YES NO

5.02.12 Has any company, partnership or unincorporated association of which the *candidate* is or has been a controller, director, senior manager, partner or company secretary, in the United Kingdom or elsewhere, at any time during their involvement, or within one year of such an involvement, been put into liquidation, wound up, ceased trading, had a receiver or administrator appointed or entered into any voluntary arrangement with its creditors?

YES NO



I have supplied further information related to this page in Section 6[†]

YES NO

5.03 Business and Employment Matters

5.03.1 Has the *candidate* ever been:

a Disqualified from acting as a director or similar position (one where the *candidate* acts in a management capacity or conducts the affairs of any company, partnership or unincorporated association)?

YES NO

b The subject of any proceedings of a disciplinary nature (whether or not the proceedings resulted in any finding against the *candidate*)?

YES NO

c The subject of any investigation which has led or might lead to disciplinary proceedings?

YES NO

d Notified of any potential proceedings of a disciplinary nature against the *candidate*?

YES NO

e The subject of an investigation into allegations of misconduct or malpractice in connection with any business activity? (this question covers internal investigation by an authorised *firm*, as well as investigation by a regulatory body, at any time.)

YES NO

5.03.2 Has the *candidate* ever been refused entry to, or been dismissed, suspended or requested to resign from, any professional, vocation, office or employment, or from any fiduciary office or position of trust whether or not remunerated?

YES NO

5.03.3 Does the *candidate* have any material written complaints made against the *candidate* by the *candidate*'s clients or former clients in the last five years which the *candidate* has accepted, or which are awaiting determination, or have been upheld – by an ombudsman or complaints scheme?

YES NO

5.03.4 Has the *candidate* ever participated in arbitration proceedings?

YES NO



I have supplied further information related to this page in Section 6[†] YES NO

5.04 Regulatory Matters

5.04.1 In relation to activities regulated by the *FCA* and/or *PRA* or any other regulatory body (see note section 5), has:

- The *candidate*, or
- Any company, partnership or unincorporated associate of which the *candidate* is or has been a controller, director, senior manager, partner or company secretary, during the *candidate's* association with the entity and for a period of three years after the *candidate* ceased to be associated with it, ever –

a	Been refused, had revoked, restricted, been suspended from or terminated, any licence, authorisations, registration, notification, membership or any other permission granted by any such body?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
b	Been criticised, censured, disciplined, suspended, expelled, fined or been the subject of any other disciplinary or interventional action by any such body?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
c	Received a warning (whether public or private) that such disciplinary or interventional action may be taken against the <i>candidate</i> or the <i>firm</i> ?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
d	Been the subject of an investigation by any regulatory body, whether or not such an investigation resulted in a finding against the <i>candidate</i> or the <i>firm</i> ?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
e	Been required or requested to produce documents or any other information to any regulatory body in connection with such an investigation (whether against the <i>firm</i> or otherwise)?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
f	Been investigated or been involved in an investigation by an inspector appointed under companies or any other legislation, or required to produce documents to the Secretary of State, or any other authority, under any such legislation?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
g	Ceased operating or resigned whilst under investigation by any such body or been required to cease operating or resign by any regulatory body?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
h	Decided, after making an application for any licence, authorisation, registration, notification, membership or any permission granted by any such body, not to proceed with it?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
i	Been the subject of any civil action related to any regulated activity which has resulted in a finding by a court?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
j	Provided payment services or distributed or redeemed e-money on behalf of a regulated <i>firm</i> or itself under any contractual agreement where that agreement was terminated by the regulated <i>firm</i> ?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
k	Been convicted of any criminal offence, censured, disciplined or publicly criticised by any inquiry, by the Takeover Panel or any governmental or statutory authority or any other regulatory body (other than as indicated in this group of questions).	YES <input type="checkbox"/>	NO <input type="checkbox"/>
l	Been on a board of directors in an operating undertaking that has not been granted a release from liability?	YES <input type="checkbox"/>	NO <input type="checkbox"/>



I have supplied further information related to this page in Section 6[†] YES NO

[†] The above question(s) should be completed whether submission of this form is online or in one of the other ways set out in SUP 15.7.4R- 15.7.9G or in 'Solvency II firms: Senior Insurance Managers Regime - Applications and Notifications' in the *PRA* Rulebook Long Form A –Solvency II firms Application to perform controlled functions October 2018

5.04.2

In relation to activities regulated by the *FCA/PRA* or any other regulatory body, has the *candidate* or any *firm* at which the *candidate* holds or has held a position of influence at any time during and within one year of the *candidate's* association with the *firm* ever:

- a** Been found to have carried on activities for which authorisation or registration by the *FCA/PRA* or any other regulatory body is required without the requisite authorisations? YES NO
- b** Been investigated for the possible carrying on of activities requiring authorisation or registration by the *FCA/PRA* or any other regulatory body without the requisite authorisation whether or not such investigation resulted in a finding against the *candidate*? YES NO
- c** Been found to have performed a *controlled function* (or an equivalent function requiring approval by the *FCA/PRA* or any other regulatory body) without the requisite approval? YES NO
- d** Been investigated for the possible performance of a *controlled function* (or an equivalent function requiring approval by the *FCA/PRA* or any other regulatory body) without the requisite approval, whether or not such investigation resulted in a finding against the *candidate*? YES NO
- e** Been found to have failed to comply with an obligation under the Electronic Money Regulations 2011 or Payment Services Regulations 2009 to notify the *FCA/PRA* of the identity of a person acting in a position of influence over its electronic money or payment services business? YES NO
- f** Been the subject of disqualification direction under section 59 of the Financial Services Act 1986 or a prohibition order under section 56 FSMA, or received a warning notice proposing that such a direction or order be made, or received a private warning? YES NO



I have supplied further information related to this page in Section 6[†] YES NO

[†] The above question(s) should be completed whether submission of this form is online or in one of the other ways set out in SUP 15.7.4R- 15.7.9G or in 'Solvency II firms: Senior Insurance Managers Regime - Applications and Notifications' in the *PRA* Rulebook Long Form A –Solvency II firms Application to perform controlled functions October 2018

5.05 Other Matters

5.05.1 Is the *candidate*, in the role to which the application relates, aware of:

any business interests, employment obligations, or any other circumstance which may conflict with the performance of the *controlled functions* for which approval is now being sought?

YES NO

5.05.2 Does the *candidate* have, or know of, any:

a Qualifying ownership² or any other form of substantial influence in the *firm* or *group*, or any other companies

If yes, please provide:

1. Company name and registration number
2. Nature and scope of the operations
3. The registered office of the company
4. Possession in percentage

YES NO

b Close relatives with ownership shares in the *firm* or *group*

YES NO

c Close relatives with any other financial relations in the *firm* or *group*

YES NO

d Any other commitments that may give rise to a conflict of interest

YES NO

If 'yes' to any of the above, please provide explanations of the circumstances and how the individual intends to mitigate this.

5.05.3 Are the *candidate* or the *firm* aware of any other information relevant to this notification that we might reasonably expect from the *candidate*?

YES NO

5.05.4 Has the *firm* undertaken a criminal records check in accordance with the requirements of the *PRA*?

YES NO

Please note that a *firm* is required to obtain the fullest information that it is lawfully able to obtain about the *candidate* under Part V of the Police Act 1997 (Certificates of Criminal records, etc) and related subordinated legislation of the *UK* or any part of the *UK* before making the application. (Applications and Notifications in the *PRA Rulebook*)

If yes, please enter date the check was undertaken

Date (dd/mm/yy):

Note: if date is more than 3 months prior to current date or 3 months prior to date of application submission or the check has not been undertaken, please provide details why in section 6.

5.05.5 Has / Have a reference or references been obtained from current and previous employer(s) in accordance with the requirements of the *PRA*

YES NO

² As defined in Article 13(21) of the Solvency II Directive, qualifying ownership is 'direct or indirect holding in an undertaking which represent 10% or more of the capital or of the voting rights or which makes it possible to exercise a significant influence over the management of that undertaking'.

or FCA?

If No, please provide details why the reference or references has/have not been obtained.

Please note that a firm is required to take reasonable steps to obtain appropriate references from any current or previous employer of the candidate during the last 6 years (see SYSC 22 and Insurance - Fitness and Propriety 2.5 in the PRA Rulebook). "Employer" has an extended meaning for these purposes.



I have supplied further information related to this page in Section 6[†]

YES

NO

6.00

- If there is any other information the *candidate* or the *firm* considers to be relevant to the application, it must be included here.
- Please provide full details of
 - why the *candidate* is competent and capable to carry out the *controlled function(s)* applied for.
 - why the appointment complements the *firm's* business strategy, activity and market in which it operates.
 - how the appointment was agreed including details of any discussions at governing body level (where applicable).
- Provide a copy of the *candidate's*:-
 - Scope of Responsibilities with this form. This is not required for *candidates* for *controlled function* CF30 only.
 - Roles description
 - Curriculum Vitae (C.V)
 - Place in the Applicant's organisational chart
- Please also include here any additional information indicated in previous sections of the Form.
- **Please include a list of all directorships currently or previously held by the *candidate* in the past 10 years (where *director* has the meaning given in the *Glossary* of the *PRA Rulebook*.)**
- If there is insufficient space, please continue on a separate sheet of paper and clearly identify the section and question to which the additional information relates.
- **Full details must be provided here if there were any issues that could affect the Fitness and Propriety of the individual that arose when leaving an employer listed in section 4 or if any question has been answered 'yes' in section 5.**

Question	Information

† The above question(s) should be completed whether submission of this form is online or in one of the other ways set out in SUP 15.7.4R- 15.7.9G or in 'Solvency II firms: Senior Insurance Managers Regime - Applications and Notifications' in the *PRA Rulebook* Long Form A –Solvency II firms Application to perform controlled functions October 2018

Declaration of *Candidate*

It is a criminal offence, knowingly or recklessly, to give the *FCA* and/or *PRA* information that is materially false, misleading or deceptive (see sections 398 and 400 Financial Services and Markets Act 2000). Even if you believe or know that information has been provided to the *FCA* and/or *PRA* before (whether as part of another application or otherwise) or is in the public domain, you must nonetheless disclose it clearly and fully in this form and as part of this application – you should not assume that the *FCA* and/or *PRA* will itself identify such information during the assessment of this application.

There will be a delay in processing the application if information is inaccurate or incomplete, and it may call into question the suitability of the *candidate* and/or lead to the *FCA* and/or *PRA* exercising its powers (including but not limited to taking disciplinary/ Enforcement action). You must notify the *FCA* and/or *PRA* immediately if there is a change to the information in this form and/or if inaccurate information has been provided (insofar as the *FCA* and/or *PRA* is reasonably likely to consider the information material).

The *candidate* confirms that the information provided in this application is accurate and complete to the best of his/her knowledge and that he or she has read the notes to this form. The *candidate* will notify the *FCA* and/or *PRA* immediately if there is a material change to the information provided.

The *candidate* confirms that the attached Scope of Responsibilities³ accurately reflects the aspects of the affairs of the *firm* which it is intended that the *candidate* will be responsible for managing. The *candidate* confirms that they have accepted all the responsibilities set out in this Scope of Responsibilities.

The *candidate* authorises the *FCA* and/or *PRA* to make such enquiries and seek such further information as it thinks appropriate to identify and verify information that it considers relevant to the assessment of this application.

The *candidate* acknowledges and agrees that these checks may include credit reference checks or information pertaining to fitness and propriety, and is aware that the results of these enquiries may be disclosed to the employer/Applicant.

Where applicable, the *candidate* agrees that he or she may be required to apply for a search to be made as to whether any criminal records are held in relation to him or her and to obtain a certificate (where such certificate can be obtained) and to disclose the result of that search to the firm submitting this application.

The *candidate* agrees that the *FCA* and/or *PRA* may use the address specified for the *candidate* in this Form as the proper address for service in the United Kingdom as defined in Financial Services and Markets Act 2000 (Service of Notice) Regulations (SI 2001/1420) to serve any notices on that *candidate*.

For the purposes of complying with the Data Protection Act 1998, the personal information provided in this Form will be used by the *FCA* and *PRA* to discharge their statutory functions under the Financial Services and Markets Act 2000 and other relevant legislation, and will not be disclosed for any other purpose without the permission of the *candidate*.

The *candidate* confirms that he or she understands the regulatory responsibilities of the proposed role as set out in the rules of conduct in the *FCA*'s *COCON* and/or *PRA Rulebook: Solvency II firms: Insurance- Conduct Standards* (as applicable).

The *candidate* is aware that, while advice may be sought from a third party (e.g. legal advice), responsibility for the accuracy of information, as well as the disclosure of relevant information, on the Form is ultimately the responsibility of those who sign the application.

In addition to other regulatory responsibilities, *firms*, and *approved persons* have a responsibility to disclose to the *FCA* and/or *PRA* matters of which it would reasonably expect to be notified.

Failure to notify the *FCA* and/or *PRA* of such information may lead to the *FCA* and/or *PRA* taking disciplinary or other action against the Applicant and/or the *candidate*.

Tick here to confirm you have read and understood this declaration:

7.01 *Candidate's full name*[†]

7.02 Signature *

Date [†]

³ This is not applicable for *candidates* for *controlled function* CF30 only.

* The above question(s) appears on a paper form submission only. That question does not appear on an electronic form submission.

Declaration of Firm

It is a criminal offence, knowingly or recklessly, to give the *FCA* and/or *PRA* information that is materially false, misleading or deceptive (see sections 398 and 400 Financial Services and Markets Act). Even if you believe or know that information has been provided to the *FCA* and/or *PRA* before (whether as part of another application or otherwise) or is in the public domain, you must nonetheless disclose it clearly and fully in this form and as part of this application – you should not assume that the *FCA* and/or *PRA* will itself identify such information during the assessment of this application. There will be a delay in processing the application if information is inaccurate or incomplete, and it may call into question the suitability of the *candidate* and/or lead to the *FCA* and/or *PRA* exercising its powers under *FSMA* (including but not limited to taking disciplinary/ Enforcement action). You must notify the *FCA* and/or *PRA* immediately if there is a change to the information in this form and/or if inaccurate information has been provided (insofar as the *FCA* and/or *PRA* is reasonably likely to consider the information material).

In addition to other regulatory responsibilities, *firms*, and *approved persons* have a responsibility to disclose to the *FCA* and/or *PRA*, matters of which it would reasonably expect to be notified. Failure to notify the *FCA* and/or *PRA* of such information may lead to the *FCA* and/or *PRA* taking disciplinary or other action against the Applicant and/or the *candidate*.

The Applicant confirms that the information provided in this application is accurate and complete to the best of its knowledge and that it has read the notes to this form. The Applicant will notify the *FCA* and/or *PRA* immediately if there is a material change to the information provided.

The Applicant authorises the *FCA* and/or *PRA* to make such enquiries and seek such further information as it thinks appropriate to identify and verify information that it considers relevant to the assessment of this application.

Where applicable, the Applicant confirms that it has obtained the fullest information that it is lawfully able to obtain about the *candidate* under Part V of the Police Act 1997 and any related subordinated legislation of the UK or any part of the UK, and (where available) has given due consideration to that information in determining that *candidate* to be fit and proper.

In making this application the Applicant believes on the basis of due and diligent enquiry and, where applicable, by reference to the criteria in FIT in the *FCA Handbook* and/or the Fitness and Propriety sections in the *PRA Rulebook* that the *candidate* is a fit and proper person to perform the *controlled function(s)* listed in section 3.

The Applicant also believes, on the basis of due and diligent enquiry, that the *candidate* is competent to fulfil the duties required in the performance of such function(s).

The Applicant confirms that it has complied with its obligations under Equality and Diversity legislation when selecting the Individual to perform the function(s) applied for.

The Applicant confirms that it has made the *candidate* aware of their regulatory responsibilities as set out in the rules of conduct in the *FCA's COCON* and/or *PRA Rulebook: Insurance- Conduct Standards* (as applicable).

The Applicant confirms that the Scope of Responsibilities⁴ submitted with this form accurately reflects the aspects of the affairs of the *Firm* which it is intended that the *candidate* will be responsible for managing.

The Applicant is aware that, while advice may be sought from a third party (e.g. legal advice), responsibility for the accuracy of information, as well as the disclosure of relevant information, on the Form is ultimately the responsibility of those who sign the application.

In signing this form on behalf of the Applicant:

I confirm that the information in this form is accurate and complete to the best of my knowledge and belief and that I have read the notes to this form.

I confirm that I have authority to make this application and provide the declarations given by the Applicant, and sign this form, on behalf of the *firm* identified in section 2.01 and/or each *firm* identified in section 3.04. I also confirm that a copy of this form, as submitted to the *FCA* and/or *PRA*, will be sent to each of those *firms* at the same time as submitting the Form to the *FCA* and/or *PRA*.

Tick here to confirm you have read and understood this declaration:

7.03 Name of the *firm* submitting the application[†]

7.04 Name of person signing on behalf of the Applicant[†]

7.05 Job title[†]

7.06 Signature*

Date[†]

⁴ This is not applicable for *candidates* for *controlled function* CF30 only.

* The above question(s) appears on a paper form submission only. That question does not appear on an electronic form submission.